
ALCOHOL ALERT

National Institute on Alcohol Abuse and Alcoholism

No. 58

October 2002

Changing the Culture of Campus Drinking

Drinking on college campuses is more pervasive and destructive than many people realize. The extent of the problem was recently highlighted by an extensive 3-year investigation by the Task Force on College Drinking, commissioned by the National Institute on Alcohol Abuse and Alcoholism (NIAAA). The Task Force reports that alcohol consumption is linked to at least 1,400 student deaths and 500,000 unintentional injuries annually (1). Alcohol consumption by college students is associated with drinking and driving, diminished academic performance, and medical and legal problems. Nondrinking students, as well as members of the surrounding community, also may experience alcohol-related consequences, such as increased rates of crime, traffic crashes, rapes and assaults, and property damage. For example, each year, more than 600,000 students are assaulted by other students who have been drinking (1). Yet efforts to reduce student drinking have largely been unsuccessful, in part because proven, research-based prevention strategies have not been consistently applied.

This *Alcohol Alert* presents key findings from the Task Force's landmark report, *A Call to Action: Changing the Culture of Drinking at U.S. Colleges*. It describes the factors that influence college drinking, approaches to help college administrators address the problem, and resources for more detailed information on this important topic (2).

Alcohol Alert, a publication of the National Institute on Alcohol Abuse and Alcoholism, provides timely information on alcohol research and treatment to health professionals and other interested people. This issue is the fifty-eighth in the series.

The Culture of College Drinking

Alcohol consumption on many campuses has evolved into a rite of passage. Traditions and beliefs handed down through generations of college drinkers serve to reinforce students' expectations that alcohol is a necessary component of social success (2). The role of alcohol in college life is evident in the advertising and sale of alcoholic beverages on or near campuses. This combination of social and environmental influences creates a culture of drinking that passively or actively promotes the use of alcohol. In a recent survey that questioned students about patterns and consequences of their alcohol use during the past year (3), 31 percent of participants reported symptoms associated with alcohol abuse (e.g., drinking in hazardous situations and alcohol-related school problems), and 6 percent reported 3 or more symptoms of alcohol dependence (e.g., drinking more or longer than initially planned and experiencing increased tolerance to alcohol's effects). Although it is true that most high-risk student drinkers reduce their consumption of alcohol after leaving college, others may continue frequent, excessive drinking, leading to alcoholism or medical problems associated with chronic alcohol abuse (4).

Alcohol consumption on many campuses has evolved into a rite of passage.

Factors Influencing College Drinking

Students' drinking habits are influenced by a combination of personal and environmental factors. Relevant personal factors include family influences, personality, and a person's biological or genetic susceptibility to alcohol abuse (5,6). In addition, many students arrive at college with preexisting positive expectations about alcohol's effects and often with a history of alcohol consumption. Thirty percent of 12th graders, for example, report heavy episodic drinking in high school, slightly more report having "been drunk," and almost three-quarters report drinking in the past year (7).

Many students arrive at college with a history of alcohol consumption.

Certain campus characteristics also reinforce the culture of college drinking. Rates of excessive alcohol use are highest at colleges and universities where Greek systems (i.e.,

A Commentary by Raynard Kington, M.D., Ph.D., Acting NIAAA Director3



fraternities and sororities) dominate, at those where sports teams have a prominent role, and at schools located in the Northeast (8). In the local community, tolerance of student drinking may permit alcoholic beverage outlets and advertising to be located near campus. Likewise, there may be lax enforcement of the laws prohibiting alcohol sales to persons below the minimum legal drinking age and penalizing underage students who use fake IDs to obtain alcohol (9).

Changing the Culture of Drinking

In 1998 the National Advisory Council of the National Institute on Alcohol Abuse and Alcoholism established a Task Force of college presidents, alcohol researchers, and students to review the existing research literature on college drinking as a basis for implementing and evaluating alcohol prevention programs. The Task Force commissioned 24 studies examining the problem of drinking among college students. The results of these studies are summarized in the Task Force's final report (see "Resources" for information on the availability of this report). Central to the findings was the concept that it is first necessary to change the culture of college drinking if prevention strategies are to be effective. The report emphasizes the need for collaboration between academic institutions, researchers, and the community to effect lasting change (2).

The Task Force's analysis strongly supports the use of a "3-in-1 Framework" to target three primary audiences simultaneously: (1) individual students, including high-risk drinkers; (2) the student body as a whole; and (3) the surrounding community. Collaboration with the community promotes cooperative prevention efforts for the benefit of all concerned (10–13).

Prevention Strategies

Before launching prevention strategies to address the problem of college drinking, it is necessary to define the patterns of alcohol consumption that may occur on campus. Surveys show that approximately 70 percent of college students consumed some alcohol in the past month (14). Although some of these students can be considered problem drinkers (e.g., frequent heavy episodic drinkers or those who display symptoms of dependence), others may drink moderately or may misuse alcohol only occasionally (e.g., drinking and driving infrequently). Surveys of drinking patterns show that college students are more likely than their age-mates who are not in college to consume any alcohol, to drink heavily, and to engage in heavy episodic drinking. However, young people who are not in college are more likely to consume alcohol every day (14).

Evidence supporting the effectiveness of alcohol prevention strategies is incomplete and often inconsistent. In addition, many strategies have not been evaluated specifically for application to college-age drinkers. The Task Force reviewed potentially useful preventive interventions and grouped them into "tiers" according to their effectiveness as determined by the results of available research-based studies.

Tier 1. Strategies Effective Among College Students. The strategies in this tier have been shown to be effective among alcohol-dependent drinkers, problem drinkers, and students whose drinking patterns place them at increased risk for developing alcohol problems. Strong evidence supports the effectiveness of the following strategies: (1) simultaneously addressing alcohol-related attitudes and behaviors (e.g., refuting false beliefs about alcohol's effects while teaching students how to cope with stress without resorting to alcohol); (2) using survey data to counter students' misperceptions about their fellow students' drinking practices and attitudes toward excessive drinking; and (3) increasing students' motivation to change their drinking habits, for example by providing nonjudgmental advice and evaluations of the students' progress. Programs that combine these three strategies have proven effective in reducing alcohol consumption (15). Some specific examples are reviewed in the Task Force report (2).

Tier 2. Strategies Effective Among the General Population That Could Be Applied to College Environments. These strategies have proven successful in populations similar to those found on college campuses. Measures include (1) increasing enforcement of minimum legal drinking age laws (16); (2) implementing, enforcing, and publicizing other laws to reduce alcohol-impaired driving, such as zero-tolerance laws that reduce the legal blood alcohol concentration for underage drivers to near zero (17); (3) increasing the prices or taxes on alcoholic beverages (18); and (4) instituting policies and training for servers of alcoholic beverages to prevent sales to underage or intoxicated patrons (9,19).

NIAAA established a Task Force of college presidents, alcohol researchers, and students to review the existing research literature on college drinking.

The Task Force reviewed potentially useful preventive interventions and grouped them into "tiers" according to their effectiveness.

The value of an alliance between the campus and the community is supported by positive results obtained by several comprehensive community efforts to reduce alcohol consumption and its consequences among both youth and adults. Examples include (1) Communities Mobilizing for Change, which succeeded in reducing alcohol sales to minors (20); (2) the Massachusetts Saving Lives Program, which accomplished relative declines in alcohol-related fatal crashes involving drivers ages 16 to 25 (21); and (3) the Community Prevention Trials Program, which reduced drinking-driving crashes, alcohol-related assault, and alcohol sales to minors (11,12,19).

Several comprehensive community efforts have reduced alcohol consumption and its consequences among both youth and adults.

Tier 3. Promising Strategies That Require Research. These strategies make sense intuitively or show theoretical promise, but more comprehensive evaluation is needed to test their usefulness in reducing the consequences of student drinking. They include more consistent enforcement of campus alcohol regulations and increasing the severity of penalties for violating them, regulating happy hours, enhancing awareness of personal liability for alcohol-related harm to others, establishing alcohol-free dormitories, restricting or eliminating alcohol-industry sponsorship of student events while promoting alcohol-free student activities, and conducting social norms campaigns to correct exaggerated estimates of the overall level of drinking among the student body.

Key Role for Campus Administration

The leadership of college presidents and school administrators is crucial to develop appropriate plans, supervise the integration of policies pertaining to different aspects of student life, and ensure consistent enforcement of drinking-related policies (22,23). Because the effectiveness of a particular strategy depends on individual campus characteristics, school administrators must determine the nature and scope of drinking and related problems on their campuses before undertaking prevention planning. A strong research base also is necessary to define realistic program objectives and maximize the use of resources, thereby increasing the likelihood of program effectiveness. Progress should be evaluated with the help of the research community, and the results should be publicized to ensure the continuation of successful programs and to add to the existing knowledge base (2).

A strong research base is necessary to increase the likelihood of program effectiveness.

Changing the Culture of Campus Drinking—A Commentary by Raynard Kington, M.D., Ph.D., Acting NIAAA Director

The National Institute on Alcohol Abuse and Alcoholism's (NIAAA's) Task Force on College Drinking was created in response to growing national concern about hazardous college drinking and the recognition that there are gaps in our knowledge base regarding effective prevention interventions. The Task Force Report, *A Call to Action: Changing the Culture of Drinking at U.S. Colleges*, which is the subject of this *Alert*, describes our new understanding of dangerous drinking behavior by college students and its consequences for both drinkers and non-drinkers. The Task Force Report is unique in several ways. First, it moves beyond the sheer number of college students engaged in high-risk drinking and focuses on the tremendous overall societal burden created by high-risk drinking on campus. Second, it describes research-based solutions and tools for college presidents, parents, communities, and students to reduce the consequences of high-risk drinking on our Nation's college campuses. Finally, it proposes a vigorous research agenda to decrease the gaps in our current knowledge.

The Task Force Report is only the beginning of what promises to be an extensive, long-term effort. Changing the culture will not come quickly or easily. The chancellor of a university where a student recently died as a result of excessive alcohol consumption said, "Our children's lives are at real risk, and universities need to make every effort to prevent any more lives from being wasted." This report underscores the wisdom of that advice and urges us to join forces in changing the culture of drinking on our Nation's campuses—from one that fosters destructive behavior to one that discourages it.

Resources

A variety of brochures and handbooks on preventing college drinking are available from NIAAA. The full text of the Task Force's final report, including recommendations and supporting review articles, can be downloaded or ordered from <http://www.collegedrinkingprevention.gov/Reports/>.

References

- (1) Hingson, R.W.; Heeren, T.; Zakocs, R.C.; et al. Magnitude of alcohol-related mortality and morbidity among U.S. college students ages 18–24. *Journal of Studies on Alcohol* 63(2):136–144, 2002. (2) National Institute on Alcohol Abuse and Alcoholism (NIAAA). *A Call to Action: Changing the Culture of Drinking at U.S. Colleges*. NIH Pub. No. 02–5010. Bethesda, MD: NIAAA, 2002. (3) Knight, J.R.; Wechsler, H.; Kuo, M.; et al. Alcohol abuse and dependence among U.S. college students. *Journal of Studies on Alcohol* 63(3):263–270, 2002. (4) Schulenberg, J.; O'Malley, P.M.; Bachman, J.G.; et al. Getting drunk and growing up: Trajectories of frequent binge drinking during the transition to young adulthood. *Journal of Studies on Alcohol* 57(3):289–304, 1996. (5) Sher, K.J.; Trull, T.J.; Bartholow, B.D.; Vieth, A. Personality and alcoholism: Issues, methods, and etiological processes. In: Leonard, K.E., and Blane, H.T., eds., *Psychological Theories of Drinking and Alcoholism*. New York: Guilford Press, 1999. pp. 54–105. (6) Zucker, R.A.; Fitzgerald, H.E.; and Moses, H.D. Emergence of alcohol problems and the several alcoholisms: A developmental perspective on etiologic theory and life course trajectory. In: Cicchetti, D., ed., *Developmental Psychopathology, Vol. 2: Risk, Disorder, and Adaptation*. New York: John Wiley & Sons, 1995. pp. 677–711. (7) Johnston, L.D.; O'Malley, P.M.; and Bachman, J.G. *Monitoring the Future: National Survey Results on Drug Use, 1975–2000. Volume I: Secondary School Students*. NIH Pub. No. 01–4924. Bethesda, MD: National Institute on Drug Abuse, 2001. (8) Presley, C.A.; Meilman, P.W.; and Leichter, J.S. College factors that influence drinking. *Journal of Studies on Alcohol* (Suppl. 14):82–90, 2002. (9) Toomey, T.L., and Wagenaar, A.C. Environmental policies to reduce college drinking: Options and research findings. *Journal of Studies on Alcohol* (Suppl. 14):193–205, 2002. (10) Hingson, R.W., and Howland, J. Comprehensive community interventions to promote health: Implications for college-age drinking problems. *Journal of Studies on Alcohol* (Suppl. 14):226–240, 2002. (11) Holder, H.D.; Saltz, R.F.; Grube, J.W.; et al. Summing up: Lessons from a comprehensive community prevention trial. *Addiction* 92(Suppl. 2):293–302, 1997. (12) Holder, H.D.; Gruenewald, P.J.; Ponicki, W.R.; et al. Effect of community-based interventions on high-risk drinking and alcohol-related injuries. *JAMA: Journal of the American Medical Association* 284(18):2341–2347, 2000. (13) Perry, C.L., and Kelder, S.H. Prevention. In: Langenbucher, J.W., ed., *Review of Addictions: Research and Treatment*, Vol. 2. New York: Pergamon Press, 1992. pp. 453–472. (14) O'Malley, P.M., and Johnston, L.D. Epidemiology of alcohol and other drug use among American college students. *Journal of Studies on Alcohol* (Suppl. 14):23–39, 2002. (15) Larimer, M.E., and Cronce, J.M. Identification, prevention, and treatment: A review of individual-focused strategies to reduce problematic alcohol consumption by college students. *Journal of Studies on Alcohol* (Suppl.14):148–163, 2002. (16) Wagenaar, A.C., and Toomey, T.L. Effects of minimum drinking age laws: Review and analyses of the literature from 1960 to 2000. *Journal of Studies on Alcohol* (Suppl. 14):206–225, 2002. (17) Wagenaar, A.; O'Malley, P.; and LaFond, L. Lowered legal blood alcohol limits for young drivers: Effects on drinking, driving, and driving-after-drinking behaviors in 30 states. *American Journal of Public Health* 91(5):801–804, 2001. (18) Cook, P.J., and Moore, M.J. The economics of alcohol abuse and alcohol-control policies. *Health Affairs* 21(2):120–133, 2002. (19) Holder, H.D.; Saltz, R.F.; Grube, J.W.; et al. A community prevention trial to reduce alcohol-involved accidental injury and death: Overview. *Addiction* 92(Suppl. 2):S155–S172, 1997. (20) Wagenaar, A.C.; Murray, D.M.; Gehan, J.P. et al. Communities mobilizing for change on alcohol: Outcomes from a randomized community trial. *Journal of Studies on Alcohol* 61(1):85–94, 2000. (21) Hingson, R.; McGovern, T.; Howland, J.; et al. Reducing alcohol-impaired driving in Massachusetts: The Saving Lives Program. *American Journal of Public Health* 86:791–797, 1996. (22) Mara, J.R. "The view from the president's office: The leadership of change." Paper prepared for the Panel on Prevention and Treatment of College Alcohol Problems, National Advisory Council on Alcohol Abuse and Alcoholism, National Institute on Alcohol Abuse and Alcoholism, 2000. (23) DeJong, W. What college presidents can do about student drinking. *About Campus* July-August:12–17, 1998.

Full text of this publication is available on NIAAA's World Wide Web site at <http://www.niaaa.nih.gov>

All material contained in the *Alcohol Alert* is in the public domain and may be used or reproduced without permission from NIAAA. Citation of the source is appreciated.

Copies of the *Alcohol Alert* are available free of charge from the National Institute on Alcohol Abuse and Alcoholism Publications Distribution Center, P.O. Box 10686, Rockville, MD 20849–0686.

U.S. DEPARTMENT OF
HEALTH AND HUMAN SERVICES
NIAAA Publications Distribution Center
Attn.: *Alcohol Alert*
P.O. Box 10686
Rockville, MD 20849–0686

PRSR STD POSTAGE AND FEES PAID NIH/NIAAA PERMIT NO. G-824
--

Official Business
Penalty for Private Use \$300